FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the S

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* CONNORS JOHN M JR					2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
COMMORS JOHN M JK													X	Direct	or		10% Ov	vner		
(Last) (First) (Middle) 13 CENTENNIAL DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2006									Officer (give title below)			Other (specify below)			
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PEABOI	OY M	A (09160												filed by One Reporting Person					
,				-										Form Perso		re thai	n One Repo	rting		
(City)	(S	tate) ((Zip)																	
		Tab	le I - Non-De	ivative	Sec	curition	es Ad	cquired, C	Disp	osed	of, or Be	enefic	cially	Owne	d					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date			Code (In	Transaction Dispose Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 ar			es Formially (D) Following (I) (I		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D) Pri		ice	Reporte Transac (Instr. 3	saction(s) . 3 and 4)			(111311.4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Code (Transaction Code (Instr.		mber rative rities iired r osed) . 3, 4	6. Date Exer Expiration D (Month/Day/		7. Title an Amount o Securities Underlyin Derivative (Instr. 3 ar	Di Si (li	Price of erivative ecurity 1str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisable	Ex _I	piration te	Title	Amou or Numb of Share	er							
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	09/30/2006		A		902		(3)(4)		(3)(4)	Common Stock	902	2	\$22.75	9,329		D			

Explanation of Responses:

- 1. All of the phantom stock units were acquired pursuant to the Hasbro, Inc. Deferred Compensation Plan for Non-Employee Directors in accordance with Section 16b-3.
- 2. Units correspond 1-for-1 with common stock.
- 3. Units are settled only in cash and are payable after the reporting person ceases to be a director.
- 4. Vesting of 39 units will occur on the earlier of 12/31/06 (provided the reporting person is still a director as of such date) and the death, disability or retirement (after age 72) of the reporting person. Vesting of 39 units will occur on the earlier of 12/31/07 (provided the reporting person is still a director as of such date) and the death, disability or retirement (after age 72) of the reporting person. The remainder of the units are immediately vested.

Tarrant Sibley, p/o/a for John M. Connors, Jr.

10/03/2006

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.